



WASHOE COUNTY SCHOOL DISTRICT

Office of Human Resources

Contact Information –Substitute

The information provided below is for informational use and will assist with being entered into the HR system along with the receipt **of your Nevada Teachers or Substitute license**. It is important to keep your contact information up to date. You may view and update your contact information anytime through Employee Online.

<u>Contact Information</u>		
Full Legal Name: _____		
Preferred First Name: _____		
Mailing Address: _____		
City _____	State _____	ZIP _____
Phone Number(s):		Type: _____
Primary: _____		Type: _____
Secondary: _____		Type: _____
Personal Email: _____		
I am a Current / Former WCSD Teacher _____		Current or Former ESP _____
School/Department: _____		Employee Number: E000 _____
Are you currently a NV PERS retiree collecting a NV PERS retirement benefit?		
Yes No		
I will be (or am currently) Student Teaching:		Start/End Month _____ to _____
Yes No		
I am fluent in the following languages _____		
I am interested in becoming a fully licensed teacher: Yes No		
I am available for emergency assignments: Yes No		

Pin : _____
Pin must be 4 or 5 numbers only Numbers cannot be in sequential order such as 1234, 5555 If you are a teacher, you must choose a PIN that is different than your teacher PIN.

Signature

Date